



Docket Number (Optional)  
20195/0200815-US0

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Application Number 10/768,971-Conf. #4544

Filed January 30, 2004

For A FIN FIELD-EFFECT TRANSISTOR AND METHOD FOR PRODUCING A FIN FIELD- EFFECT TRANSISTOR

Art Unit 2815

Examiner E. J. Wojciechowicz

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$

☐ Applicant claims small entity status. See 37 CFR 1.27.

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to  
 Deposit Account Number 04-0100 . I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 38,395

☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34

Registration number if acting under 37 CFR 1.34  
*Laura C. Blumenthal*  
 Signature

December 28, 2005  
Date

**Laura C. Brutman**

Typed or printed name

(212) 527-7664

Telephone Number

**NOTE:** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

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120.00 OP

Express Mail Label No.

Dated: \_\_\_\_\_